

County Service Area 17 (CSA-17) – 2012 Meeting Minutes

CSA-17 Advisory Committee Meeting Minutes – February 7, 2012

CSA-17 Advisory Committee Meeting Minutes – May 1, 2012

CSA-17 Advisory Committee Meeting Minutes – August 7, 2012

CSA-17 Special Advisory Committee Meeting Minutes - August 28, 2012

CSA-17 Advisory Committee Meeting Minutes - November 6, 2012



County of San Diego

HEALTH AND HUMAN SERVICES AGENCY

PUBLIC HEALTH SERVICES
HEALTH SERVICES COMPLEX

3851 ROSECRANS, SAN DIEGO, CALIFORNIA 92110
(619) 531-5800 FAX (619) 542-4186

Epidemiology & Immunization Services
Emergency & Disaster Medical Services
HIV, STD and Hepatitis
Maternal, Child and Family Health Services
Public Health Laboratory
PH Nursing
Border Health
TB Control & Refugee Health
Vital Records

NICK MACCHIONE, FACHE
DIRECTOR

WILMA J. WOOTEN, M.D., M.P.H.
PUBLIC HEALTH OFFICER

CSA-17 Advisory Committee
Tom Hickerson, Chair/Barbara Cerny, Vice-Chair
c/o Emergency Medical Services
6255 Mission Gorge Road
San Diego, CA 92120
(619) 285-6429 Fax: (619) 285-6531

CSA-17 ADVISORY COMMITTEE MEETING

Minutes

Tuesday, February 7, 2012

Members Present

Cerny, Barbara – Torrey Pines Comm. Planning Group
Haydu, Lee – City of Del Mar
Hickerson, Tom – Rancho Santa Fe Fire Protection
Nichols, Mike – City of Solana Beach
Zovanyi, Peter – Member at Large

Recorder

Wolchko, Janet I.

Agency Representatives Present

Davidson, Bret – Rancho Santa Fe Fire
Gilligan, Matt – Rural Metro
Muir, Mark – City of Encinitas
Murphy, R.N., Mary – CSA-17 Fire
Olejnik, Lorelee – Rural Metro
Pavone, Nick – Rancho Santa Fe Fire
Tanner, John – Rancho Santa Fe Fire

County Staff Present

Haynes, M.D., Bruce
Metz, R.N., Marcy
Pate, R.N., Rebecca
Yaghmaee, Saman

I. CALL TO ORDER/INTRODUCTIONS/ANNOUNCEMENTS

Tom Hickerson, Chair called the meeting to order at 4:04 p.m.

II. APPROVAL OF MINUTES

A motion was made by Peter Zovanyi, seconded by Mike Nichols to approve the November 1, 2011 minutes. Motion carried.

III. ELECTIONS OF CHAIR AND VICE-CHAIR FOR 2012

A motion was made by Tom Hickerson, seconded by Peter Zovanyi to nominate Barbara Cerny as CSA-17 Chair for 2012. Motion carried.

A motion was made by Mike Nichols, seconded by Peter Zovanyi to nominate Lee Haydu for CSA-17 Vice-Chair. Motion carried.

Citizen-at-large Representatives

According to the CSA-17 bylaws, two citizen-at-large members are nominated by the members of the CSA-17 Advisory Committee.

A motion was made by Tom Hickerson, seconded by Mike Nichols to nominate Peter Zovanyi as citizen-at-large representative for a 2-year term. Motion carried.

Peter Zovanyi has previously been a citizen-at-large member and the CSA-17 Advisory Chairperson. Mr. Zovanyi attends the CSA-17 Advisory Committee meetings on a regular basis.

A motion was made by Tom Hickerson, seconded by Peter Zovanyi to nominate John Tanner as citizen-at-large representative for a 1-year term. Motion carried.

Mr. Tanner has been a member of Rancho Santa Fe Fire for five years and has been on the Fire Board. He is currently the alternate representative for the Rancho Santa Fe Fire Protection District.

Peter Zovanyi and John Tanner have been nominated as CSA-17 Advisory Committee citizen-at-large representatives. The nomination and applications will be forwarded to the County of San Diego Clerk of the Board office and put before the Board of Supervisors for appointment.

IV. PUBLIC COMMENTS/PETITIONS

None present.

V. MANAGEMENT TEAM REPORT

A. Budget and Financial Report (Saman Yaghmaee)

1. The CSA-17 budget for the next two years has been revised to reflect the following changes in the service delivery system:
 - The SDMS/Rural Metro contract has been increased by \$438,668. The increased amount is prorated reflecting seven (7) months of the fiscal year 2011/12. In FY 12/13, SDMS contract will be budgeted at \$3,101,568 to compensate for non-resident collection that the contractor previously retained.
 - The Rancho Santa Fe Fire Protection District (RSF) contract was increased by \$126,674 due to transferring the EMS coordinator position that was previously paid by SDMS/Rural Metro. The increase in the RSF contract includes the administrative

costs of \$5,608 associated with the position that was previously paid by City of Encinitas.

- There was an increase overall in CSA-17 administration costs by \$120,000. Changes to the ambulance transport billing required CSA-17 to establish and administer its own revenue bank account which was previously handled by the billing contractor.
 - The contract with Wittman was consolidated to include all of the CSA-17 billing services. Wittman will be compensated with five percent (5%) of the collection that is estimated to be reimbursed up to \$80,000 in FY 11/12 and up to \$125,000 in FY 12/13.
 - There is a slight increase with the contracts for first responders due to the increase in the cost and maintenance for defibrillators for City of Del Mar and City of Solana Beach.
2. The revenue from transport fees should reach about \$800,000 to maintain a balanced budget in FY 11/12. This amount is expected to reach to \$1.4 million dollars in FY 12/13 and 13/14.
 3. As of December 1, 2011 to January 31, 2012, Wittman has entered about 1,100 residents' accounts from August through November. 326 residents were billed for a total of \$211,000; 769 accounts are still pending under review. Wittman has also entered a total of 744 resident and non-resident accounts for a gross collection of \$453,735 for the months of December and January. Net collection rate is expected to be at 60 to 80 percent of the account. The goal is to reach \$800,000 of revenue from transports this fiscal year.
 4. FY 11/12 Year-to-date Budget Update (July 1, 2011 to January 31, 2012)

Year-to-date Revenue: Total year-to-date revenue is at \$1,337,548. This is slightly higher by \$30,000 compared to the same period last year at \$1,306,720.
 - Revenue from property taxes is \$558,774. This is slightly higher compared to the same period last year at \$545,888.
 - Benefit fee is at \$770,683. This is slightly higher compared to the same period last year at \$750,851.
 - Interest and Miscellaneous are at \$8,091. This is slightly lower compared to the same period last year at \$9,981 due to the lower cash reserve in the account.
Year-to-date Expenditures: Expenditures are at \$1,110,426. This is slightly higher by \$63,000 compared to this period last year at \$1,046,712.
 5. Contract Update:
 - The amendments with SDMS/Rural Metro, Rancho Santa Fe and Wittman are completed.
 - The ambulance transport services contract is ending in June 30, 2013. CSA administration is planning for the new competitive bid process. A meeting will be scheduled in March to discuss the current service delivery model, including what

worked well during the last 6 years and recommended changes for the next contract period.

B. Administrative Report (Marcy Metz, Chief EMS)

1. The CSA-17 Advisory Committee budget is included in the EMS County Budget Build which is done this time of the year. Ms. Metz thanked Saman Yaghmaee for the time and work he has contributed with the Budget Build.
2. Every three years the trauma centers in San Diego county go through a re-verification visit by the American College of Surgeons (ACS). All six of the designated trauma centers will go through verification review this year. Two of the centers will be reviewed each month in February, March and May.
3. The Golden Guardian 2012 (GG2012) exercise is scheduled for May 15-17, 2012. The exercise scenario is a 7.0 earthquake along the San Andreas Fault.
 - Day 1 - San Diego County EMS participation will be as a logistics hub.
 - Day 2 - EOC will be activated and open, EMS DOC (MOC) will be fully activated and hospitals and agencies will be in play
 - Day 3 - County departments will be practicing COOP exercises. The statewide exercise will be a great way to train and identify areas of improvement.

Peter Zovanyi asked if San Onofre participates in the exercise. Dr. Haynes responded that every few years an exercise is required from FEMA to review emergency response of the San Onofre plant. The exercise includes possible evacuation and patient care. Every 6 years at Carlsbad High School there is a disaster drill exercise using radiation monitors with practice decontamination and medication administration. Every 10 years there is an ingestion pathway drill and modeling of the radiation plume to track and determine agricultural products, water and food contamination. Potassium iodine is the blocking agent used to prevent thyroid cancer and exposure to radioactive iodine, which is usually a threat to young children later in life. The plan is reviewed by the Office of Emergency Services (OES) at the time of practice.

Action Item: Dr. Haynes will check with OES on the areas that could be affected and that are in the emergency planning zone.

C. Medical Director's Report (Bruce Haynes, M.D., EMS Medical Director)

This year's flu season has been mild compared to the last 3 years. There have been a few respiratory viruses with children the last few weeks.

D. Paramedic Provider Report (Matt Gilligan)

Matt Gilligan explained how the exemption report is produced. Crews fill out the reports and send them to the Operations Chief, and then they are forwarded to the County. As of March 1st, First Watch will have the reports online as well as on paper. Participants,

Chiefs and the County who review the reports can access them online from a secured website.

CE Training:

- Near drowning and shark attack classes were conducted by Life Guard Services.
- Chief Davidson and Mary Murphy, R.N. created a multi-casualty incident training program on the multi-casualty plan guidelines.
- 36 hours of CE are provided for fire personnel yearly.

Community Education:

- Blood pressure checks have been conducted at the Rancho Senior Center and Encinitas Senior Center.
- Car seat check and instillation instructions are given.
- Worked with Project Heartbeat to distribute and conduct training on AED's. Instillation of AED's were done at Solana Beach and Encinitas.
- CPR and AED training has also been done at the Solana Beach schools and the Rancho Santa Fe Fire Department.

There is no requirement for people to register AED's when they purchase them. Private businesses purchase their own AED's. For public agencies such as fire departments and non-profit agencies (churches and schools) there is grant assistance available.

VI. SET NEXT MEETING/ADJOURNMENT

The next CSA-17 Advisory Board meeting is scheduled for Tuesday, May 1, 2012 at 4:00 p.m.

The meeting was adjourned at 5:45 p.m.

Submitted by

Janet I. Wolchko, Administrative Secretary
County of San Diego Emergency Medical Services



County of San Diego

HEALTH AND HUMAN SERVICES AGENCY

PUBLIC HEALTH SERVICES
HEALTH SERVICES COMPLEX

3851 ROSECRANS, SAN DIEGO, CALIFORNIA 92110
(619) 531-5800 FAX (619) 542-4186

NICK MACCHIONE, FACHE
DIRECTOR

WILMA J. WOOTEN, M.D., M.P.H.
PUBLIC HEALTH OFFICER

Epidemiology & Immunization Services
Emergency & Disaster Medical Services
HIV, STD and Hepatitis
Maternal, Child and Family Health Services
Public Health Laboratory
PH Nursing
Border Health
TB Control & Refugee Health
Vital Records

CSA-17 Advisory Committee
Barbara Cerny, Chair/Lee Haydu, Vice-Chair
c/o Emergency Medical Services
6255 Mission Gorge Road
San Diego, CA 92120
(619) 285-6429 Fax: (619) 285-6531

CSA-17 ADVISORY COMMITTEE MEETING

Minutes

Tuesday, May 1, 2012

Members Present

Cerny, Barbara – Torrey Pines Comm. Planning Group
Hickerson, Tom – Rancho Santa Fe Fire Protection
Sinnott, Terry – City of Del Mar
Zovanyi, Peter – Member at Large

County Staff Present

Pate, R.N., Rebecca
Yaghmaee, Saman

Recorder

Wolchko, Janet I.

Agency Representatives Present

Gilligan, Matt – Rural Metro
Henry, Scott – Encinitas Fire
Morgan, Darrin – Encinitas Fire
Muir, Mark – City of Encinitas
Olejnik, Lorelee – Rural Metro
Russo, Joe – Rural Metro
Tanner, John - Rancho Santa Fe Fire
Twohy, Frank – Elfin Forest/Harmony Grove
Johnson, Wayne – Rural Metro

I. CALL TO ORDER/INTRODUCTIONS/ANNOUNCEMENTS

Barbara Cerny, Chair called the meeting to order at 4:04 p.m.

II. APPROVAL OF MINUTES

A motion was made by Peter Zovanyi, seconded by Tom Hickerson to approve the February 7, 2012 minutes as corrected. Motion carried.

III. PUBLIC COMMENTS/PETITIONS

None present.

IV. MANAGEMENT TEAM REPORT

A. Budget and Financial Report (Saman Yaghmaee) Year to date information for CSA-17 was from July 1, 2011 to April 30, 2012.

1. Year-to-date Revenue:

Resident transports	\$ 197,323
Non-resident transports	49,331
Benefit fees	899,372
Property taxes	874,635
Interest and Miscellaneous	<u>9,032</u>

Year-to-date revenue \$2,029,693

Year-to-date revenue is \$248,000 higher compared to the same period last year. This is due to the new streamline of revenue from transport of residents and non-residents.

Year-to-date expenditures are \$1,687,222 which is higher by \$54,073 compared to the same period last year at \$1,741,295.

2. As of July 1, 2011 the fund balance reserve was at \$1,092,907. The fund balance reserve should be approximately 1/3 of the expenditures. CSA-17 annual expenditures are close to \$3.5 million. For a healthy cash flow it is recommended that CSA-17 maintains about \$1.2 million in the reserve account. Without the addition of a resident user fee and the changes in billing, the CSA would have faced a deficit of \$351,931 for FY 2011/12. It is anticipated this change will yield approximately \$1.1 million annually, however due to unforeseen delays in implementation and public payer processes it is difficult to project revenue from ambulance transports for FY 2011/12 at this time. Reliable projections require, at a minimum, one full year of data.
3. Discussion continued on the budget process and the budget for next year. Based on the number of transports during the year, estimated revenue from non-residents, community profiles, payer types, collections and how much has been billed, CSA-17 will be close to the targeted amount of \$1.1 million.

Action Item: Budget process and the contract procurement process for ambulance transport will be added to the CSA-17 August agenda.

4. The SDMS ambulance transport services contract is expiring June 30, 2013. The process of contract procurement has started with County Purchasing and Contracting. Barbara Cerny, CSA-17 Chairperson requested that the CSA-17 Advisory Committee review

what is planned for the new competitive bid process. It was also suggested that the current service model be presented at the next CSA-17 meeting.

B. Administrative Report (Rebecca Pate, R.N.)

1. Today is "*Strike Out Stroke*" day. The event is a collaborative effort with the County of San Diego and the San Diego Consortium and is being hosted by PETCO Park. Education and information on the signs and symptoms of stroke will be presented before and during the first two innings of the game. Over 800 of the game t-shirt/ticket bundles were sold. During the Board of Supervisors' meeting this morning a proclamation was presented in honor of "*Strike Out Stroke*" day.
2. Every three years the American College of Surgeons (ACS) conducts verification visits to the six trauma centers in San Diego County. The final two trauma centers to be visited this week are Scripps Mercy and Palomar.
3. "*Sidewalk CPR Day*" is scheduled for June 7, 2012 and is a statewide effort to increase knowledge and instruct bystanders on hands only CPR. In the County of San Diego, the American Red Cross (ARC), Project Heartbeat, agencies and hospitals will be participating in "*Sidewalk CPR Day*" by teaching bystanders hands only CPR. The goal will be to teach "2012 in 2012". EMS will be giving instruction and education at the County Operations Center (COC) and the County Administration Center (CAC) from 10 to 2 pm.
4. The Golden Guardian 2012 exercise is May 15-17, 2012. The scenario is a 7.0 earthquake on the San Andreas Fault. On Day 1, EMS and the EOC will be open and working on logistics; Day 2, the EMS Medical Operations Center (MOC) will be fully activated; Day 3, County Departments will be reviewing their Continuity of Operations (COOP) plan.
5. iQCS, which is the prehospital documentation system is in the final testing. Deployment should be by the end of July.
6. EMS Commission is meeting in June in Sacramento.

C. Medical Director's Report

No report.

D. Paramedic Provider Report (Matt Gilligan)

1. As of April 1, 2012, exemption reporting is on line.
2. Joe Russo, Paramedic R.N. with Quality Assurance conducts continuous education training. Contract requirements are for fire personnel to complete 36 hours of continuing education (CE) per year.

In the last two months there have been 10 CE credit education trainings including a CPR video that Mr. Russo produced and a cardiac monitor review. In March, paramedic fire fighters took CE training for Advanced Cardiac Life Support (ALS) certification.

In April, Mary Murphy presented bomb injury patterns and trauma information. Joe Russo also produced a video on an external cardiac facing call.

3. In the last 3 to 4 weeks there have been three CPR saves.
4. Community Education Events: (Loralee Olejnik)
 - “*Sidewalk CPR Day*” scheduled for June 7, 2012 is an effort to conduct informal training and educate individuals and sidewalk bystanders on hands only CPR. Project Heartbeat is donating 300 CPR mannequins to agencies and hospital participants for the training.
 - There will be a free community CPR class on the flight deck of the USS Midway. The class is an awareness level training and will last 30 minutes.
 - Before the Padre’s game on August 5, 2012 there will be a CPR class for kids sponsored by the Padre’s foundation. After the class the kids and an accompanying adult will be able to stay and watch the game.
 - May 21-25, 2012 is EMS week. There will be several events organized during the week including a company picnic and a charity fundraiser dinner.
 - During the “*Strike Out Stoke Day*” at PETCO Park, handouts will be given with information on how to recognize the signs and symptoms of stroke.
 - Last month the Rancho Santa Fe Fire Board was certified on CPR and AED’s.
 - The Journal of Emergency Medical Services (JEMS) has an article on what is called the “Big Wave World Tour”. These are surfers who report to an area when 30 to 40 foot waves are sighted. The Emergency Response Crew for the “Big Wave World Tour” is based out of San Diego.
 - Dr. Andrew Acardi, an emergency room physician at Scripps Encinitas started the Young Leaders in Healthcare group which is a youth group for teenagers to promote interest in careers in the medical field. CSA-17 will be sending a representative to talk to the group about Emergency Medical Services.

V. NEW BUSINESS

Ms. Pate provided information from Dr. Haynes on San Onofre and the response areas for Office of Emergency Services (OES).

The established Emergency Planning Zone around San Onofre includes 12 miles around the plant. In the event of a radioactive incident this is the area that will shelter in place and evacuate. It is also the area where Potassium Iodide would be distributed to prevent the radioactive isotope from being absorbed into the thyroid.

The Public Education Zone extends 20 miles around the plant down to Carlsbad. Citizens that move there are given information regarding evacuation.

The Ingestion Pathway Zone extends 50 miles from the plant and extends down to San Diego. In the event of a radioactive release, soil, water and animals would be monitored to make sure there was no contamination of agricultural products.

VI. SET NEXT MEETING/ADJOURNMENT

The next CSA-17 Advisory Board meeting is scheduled for Tuesday, August 7, 2012 at 4:00 p.m.

The meeting was adjourned at 4:46 p.m.

Submitted by

Janet I. Wolchko, Administrative Secretary
County of San Diego Emergency Medical Services



County of San Diego

HEALTH AND HUMAN SERVICES AGENCY

PUBLIC HEALTH SERVICES
HEALTH SERVICES COMPLEX

3851 ROSECRANS, SAN DIEGO, CALIFORNIA 92110
(619) 531-5800 FAX (619) 542-4186

NICK MACCHIONE, FACHE
DIRECTOR

WILMA J. WOOTEN, M.D., M.P.H.
PUBLIC HEALTH OFFICER

Epidemiology & Immunization Services
Emergency & Disaster Medical Services
HIV, STD and Hepatitis
Maternal, Child and Family Health Services
Public Health Laboratory
PH Nursing
Border Health
TB Control & Refugee Health
Vital Records

CSA-17 Advisory Committee
Barbara Cerny, Chair/Lee Haydu, Vice-Chair
c/o Emergency Medical Services
6255 Mission Gorge Road
San Diego, CA 92120
(619) 285-6429 Fax: (619) 285-6531

CSA-17 ADVISORY COMMITTEE MEETING

Minutes

Tuesday, August 7, 2012

Members Present

Cerny, Barbara – Torrey Pines Comm. Planning Group
Haydu, Lee – City of Del Mar
Hickerson, Tom – Rancho Santa Fe Fire
Marquardt, Larry – Member-at-Large
Muir, Mark – City of Encinitas
Tanner, John – Rancho Santa Fe Fire (Alt)
Zovanyi, Peter – Member-at-Large

County Staff Present

Beam, Jamie
Cavanaugh, Adria
Metz, Marcy
Yaghmaee, Saman

Agency Representatives Present

Davidson, Bret – Rancho Santa Fe Fire Dept
Gilligan, Matt – Rural Metro
Henry, Scott – Encinitas Fire
Johnson, Wayne – Rural Metro
Michel, Tony – Rancho Santa Fe Fire Dept
Murphy, Mary – CSA-17 Fire Departments
Olejnik, Lorelee – Rural Metro
Russo, Joe – Rural Metro
Serra, John – Rural Metro
Twohy, Frank – Elfin Forest/Harmony Grove
Ward, Darrin – Encinitas Fire Dept

Recorder

Wolchko, Janet I.

I. CALL TO ORDER/INTRODUCTIONS/ANNOUNCEMENTS

Barbara Cerny, Chair called the meeting to order at 4:07 p.m.

II. APPROVAL OF MINUTES

A motion was made by Peter Zovanyi, seconded by Tom Hickerson to approve the minutes from the May 1, 2012 meeting. Some members that were present at the May meeting were not available to approve the minutes; therefore, the May minutes will be approved at the next CSA-17 Advisory Committee meeting in November.

III. PUBLIC COMMENTS/PETITIONS

There were none present or submitted.

IV. MANAGEMENT TEAM REPORT

A. Budget and Finance Report

County staff presented the fiscal year 2011/12 year end financial report to the Advisory Board. Revenue from transport of residents is currently at \$695,590 and \$147,266 for non-residents. Benefit fee revenue has seen a slight growth from \$1,349,105 in FY 2010/11 to \$1,367,330 in FY 2011/12. Property tax revenue for FY 2011/12 is at \$997,386 compared to \$987,298 in FY 2010/11. Interest is down slightly from \$20,352 in FY 2010/11 to \$16,360 in FY 2011/12.

Total revenue for FY 2011/12 is \$3,250,932 compared to \$2,356,755 in FY 2010/11. Total expenditures for FY 2011/12 are \$3,217,827 compared to \$2,642,615 in FY 2010/11.

1. Overview of County Budget Process

- a. The annual budget cycle starts July 1 and ends on June 30. Budget builds are conducted every year for two fiscal years of operations by CSA administration staff in conjunction with the Budget Division of HHSA and County's Auditor and Controller Department. The biennial budget process begins in February. A "standard" budget template from the HHSA budget division of the County is prepared for CSA-17 with information received from the prior two years, and includes adjustments for changes during the fiscal year. The "Fund Balance" process reviews the expenditures and revenue on a quarterly basis to project expenditures and revenues. The entire budget process takes about 14 to 16 weeks.

Residents of CSA-17 pay a benefit fee as part of their property tax bill. The ordinance that established the special benefit tax included an annual adjustment to the tax based on the increase in the Consumer Price Index (CPI) for San Diego area as determined by the US Department of Labor. The County Treasurer/Tax Collector transfers a portion of property taxes collected by the County to CSA-17 semi-annually.

- b. In November 2010 the Advisory Committee members approved a resident user fee of \$400 per resident transport plus \$20 per mile charge to those who are transported to a hospital by a CSA-17 provider. Without the addition of a resident user fee and the changes in billing, CSA-17 would have faced a deficit of \$351,931 for FY 2011/12.

- c. Money from property taxes and benefit fees does not come into the account until the 3rd and 4th quarter of the fiscal year; therefore, 120 days of cash should be in the cash reserve account to cover expenditures in the first two quarters of the fiscal year. To maintain a healthy cash flow there needs to be approximately 1/3 of the expenditures in the reserve, which is about \$1 million.
- d. The CSA-17 account will continue to be updated until the end of August. The final close of the FY will be available by the next quarterly Advisory meeting in November.

Questions regarding streamline of revenue and collection rates were discussed. Sources of revenue are from benefit fees and property taxes which have seen a growth at 2 percent over the past six (6) years. The percentage of collections is determined by several factors and varies with the profile of the community, how patients pay for transports, are they self insured, uninsured, or is Medical their primary insurance. Over 80 percent of CSA-17 residents have commercial insurance.

2. Budget Subcommittee

CSA-17 has an Operations Subcommittee and a Budget Subcommittee. It was recommended that the CSA-17 Advisory Committee reconvene the Budget Subcommittee to review the FY 2012/13 budget.

Appointments to the Budget Subcommittee were made.

Action item: A motion was made by Peter Zovanyi to appoint Barbara Cerny and Mark Muir to the Budget Subcommittee. Peter Zovanyi agreed to serve as an alternate. Motion passed.

B. Administrative Report (Marcy Metz, Chief EMS)

1. June 7, 2012 was "*Sidewalk CPR Day*" throughout the County of San Diego in collaboration with the American Heart Association (AHA), American Red Cross (ARC) and San Diego Project Heartbeat. There were 30 agencies that participated at 52 locations throughout San Diego County to teach adult compression only CPR. The County trained a total of 3,048 individuals - the total for southern California was 12,700. In the CSA-17 area there were six locations with a total of 347 participants trained. "*Sidewalk CPR Day*" will become an annual event. A special thanks was given to Project Heartbeat for donating 300 mannequins that were used during the demonstrations.

An incident occurred a few days after the event where a 29 year old female collapsed during a workout and a bystander that was a participant and was trained during "*Sidewalk CPR Day*" felt confident to assess the victim and started compression only CPR until the paramedics arrived. That patient was later released.

2. The iQCS prehospital computer system is moving into the implementation phase. Training will start soon.

3. The State EMS Commission is meeting in San Diego on September 19th at the Kona Kai Resort on Shelter Island from 10:00 am to 1:00 pm.
4. Regulations expected to be release are for specialty care systems, cardiac, stroke and EMS for Children.
5. The State EMS Authority (EMSA) convened a working group to review information on a Community Paramedic Program. The community paramedicine program is currently in place in other areas of the nation. Within the program, paramedics will be able to perform roles in addition to their 911 response to emergencies. The California Healthcare Foundation through UC Davis and the program contractors will be reviewing the policy issues and legislative restrictions, and how the program will fit into the healthcare system.

C. Medical Director's Report

There was no Medical Director's Report.

D. Paramedic Provider Report (Matt Gilligan)

1. Compliance reports from the first quarter were provided. Training for the online compliance utility has started and data reports from April are being worked on. That information will be available at the next meeting.
2. There was a concern regarding the affect of the Del Mar Thoroughbred Club on emergency response. The track had zero (0) responses and there was only one response in the morning on Villa de la Valle.
3. Joe Russo, Chief Davidson and Mary Murphy coordinated a number of Continuing Education (CE) classes including medication administration review and San Diego County protocol updates which is required for all paramedics. A Scripps Encinitas ER group taught and reviewed environmental injuries and trauma.
4. Community Education Events: (Loralee Olejnik)
 - On August 25th there will be a community "Feeling Fit Festival" at Leo Mullins Sports Park in the City of Encinitas.
 - Project Heartbeat celebrated their 100th life save.
 - CPR Training: There will be CPR training for kids at Saturday's Padre baseball game; CPR training was given on the Midway Museum; 230 students were trained in CPR at UCSD summer camp. On September 8th there will be CPR training at the San Diego Children's Museum.
 - In the fall there will be a Senior Information Fair in Solana Beach.
 - Community education is going to sponsor the Rancho Santa Fe upcoming fund raiser.

5. Operations Overview – a map was shown of the CSA-17 area and where paramedic provider units are located.

V. NEW BUSINESS

A. Current Service Delivery Model

An ambulance configuration of the CSA-17 area was given. Units are staffed with one Paramedic and one Emergency Medical Technician (EMT). There is also a twelve-hour unit with one rural metro paramedic field training officer and one fire fighter paramedic. There are 17 full-time Paramedics, 16 full-time EMT's and one rotating Fire Fighter Paramedic that staff the six CSA-17 ambulance units.

In response to a question from the Advisory Board, an explanation was given of the EMT entry level position, and the lifeguard, fire and ambulance training module. Also discussed was station capability, number of calls per jurisdiction and response time standard.

Current response time standards identified in the CSA-17 contract is under 10 minutes from time of dispatch to arrival on the scene of the incident. It is required that all four jurisdictions meet 90 percent with the exception of Elfin Forest. If the response time of less than ten minutes is not met, the ambulance crew is required to complete and submit an On-Line Exemption Report.

Thirty-six hours of Continuing Education credits are provided through the Rural/Metro Education Department. Runs are reviewed and assessments are done on the paramedic performance vital signs treatment, intervention, the narrative and quality of care.

The Advisory Board requested information on the location of ambulances and information from the operations point of view regarding the Request for Proposal including numbers of calls and ways to improve the system. It was mentioned that there was a difference with covering geography or covering calls, the locations of where most of the calls occur, where the units are best placed and station availability. Also that there are differences from the recommendations made in the Deccan Consultant Study conducted prior to the last RFP.

B. Request for Proposal (RFP) Process (Jamie Beam)

California Health and Safety Code require areas that have previously been competitively procured for ambulance transportation have those services go out to bid at periodic intervals not to exceed 10 years. The process has three phases, development, open solicitation and evaluation phase.

The developmental stage involves the stakeholders. Policies ensure a fair and competitive process and that one party does not have an unfair advantage over another. There will be a request for information (RFI) open public meeting in September for interested providers, advisory board members, board members of the group and interested members of the community to attend and provide input on the service delivery model. Feedback received from the meeting can be used for the development of the solicitation

documents. Because it is a public forum that is open to all, participation will not preclude any potential bidders to submit a proposal. Following this process the development stage becomes closed due to confidentiality and conflict of interest. Subject matter experts can be used in this phase to assist in writing the finalized RFP documents and to incorporate the community feedback after they are vetted for conflict of interest.

The solicitation stage is when the RFP is posted on the public County website. There will be a pre-proposal conference set where interested parties can ask questions specific to the solicitation. Answers will be given out on the website as an addendum to the RFP.

When the RFP closes it goes into the evaluation phase. Proposals are evaluated by a source selection committee to select the proposal that best meets the requirements in the RFP and offers the best value to CSA-17 and the County. Members of the source selection committee will be vetted through the same process as the subject matter experts. When the bid is awarded the transition will start with the new contract to ensure there is no disruption of services in CSA-17. The target date to have the RFP package completed and posted is November 2012. The evaluation of proposals will occur in January 2013 with a target of posting the notice of intent to award the contract by March 2013.

The County has the option to extend the current providers contract date by six months if there are delays in the process.

C. ALS Provider Contract (Jamie Beam)

A recommendation was made to schedule an open public community forum in September to discuss and participate in development of the RFP subject matter. The Advisory Board can also schedule a special meeting to discuss the RFP, but will have to include a notice on the County BuyNet system so any potential bidders can also be included in the discussion.

It was asked that the CSA-17 Advisory Committee make a statement to put in the Board Letter to move ahead with the RFP process. The Board Letter and Board of Supervisor approval is to seek an RFP, not for approval of the RFP process. If the contract exceeds \$1 million annually, it will need to go before the Board of Supervisors for approval.

Lee Haydu made a motion to make a statement for the Board Letter regarding approval for a contract that exceeds \$1 million. There was no second for the motion.

The advisory members suggested scheduling a special meeting before the community meeting in September to discuss the CSA-17 delivery model with CSA-17 advisory members and operations.

Barbara Cerny, CSA-17 Chair will coordinate with the County to schedule a special meeting of the Advisory Committee to discuss the area service delivery model. Profile and data information for discussion should include the number of runs, historical data on how many transports are provided in a time period, type of transport, number of residents and non-residents and demographic information on the area. Minimum requirements on

how services should be met, and how the provider will meet those requirements are from the EMS policies and state guidelines.

VI. SET NEXT MEETING/ADJOURNMENT

The next CSA-17 Advisory Board meeting is scheduled for Tuesday, November 6, 2012 at 4:00 p.m.

The meeting was adjourned at 6:08 p.m.

Submitted by

Janet I. Wolchko, Administrative Secretary
County of San Diego Emergency Medical Services



County of San Diego

HEALTH AND HUMAN SERVICES AGENCY

NICK MACCHIONE, FACHE
DIRECTOR

WILMA J. WOOTEN, M.D., M.P.H.
PUBLIC HEALTH OFFICER

PUBLIC HEALTH SERVICES
HEALTH SERVICES COMPLEX

3851 ROSECRANS, SAN DIEGO, CALIFORNIA 92110
(619) 531-5800 FAX (619) 542-4186

Epidemiology & Immunization Services
Emergency & Disaster Medical Services
HIV, STD and Hepatitis
Maternal, Child and Family Health Services
Public Health Laboratory
PH Nursing
Border Health
TB Control & Refugee Health
Vital Records

CSA-17 Advisory Committee
Barbara Cerny, Chair/Lee Haydu, Vice-Chair
c/o Emergency Medical Services
6255 Mission Gorge Road
San Diego, CA 92120
(619) 285-6429 Fax: (619) 285-6531

CSA-17 SPECIAL ADVISORY COMMITTEE MEETING

Minutes

Tuesday, August 28, 2012

Members Present

Cerny, Barbara – Torrey Pines Comm. Planning Group
Muir, Mark – City of Encinitas
Nichols, Mike – City of Solana Beach
Sinnott, Terry – City of Del Mar (Alt)
Tanner, John – Rancho Santa Fe Fire (Alt)
Zovanyi, Peter – Member-at-Large

County Staff Present

Beam, Jamie
Cavanaugh, Adria
Haynes, M.D., Bruce
Metz, Marcy
Mulder, Sian
Pate, Rebecca
Yaghmaee, Saman

Agency Representatives Present

Austin, David – American Medical Response
Bavario, Adam – Gentle Care Transport Inc.
Davidson, Bret – Rancho Santa Fe Fire Dept
Downs, Yvonne – Symons Ambulance
Gilligan, Matt – Rural Metro
Johnson, Wayne – Rural Metro
Michel, Tony – Rancho Santa Fe Fire Dept
Murphy, Mary – CSA-17 Fire Departments
Murphy, Michael – American Medical Response
Rice, Mike – American Medical Response
Russo, Joe – Rural Metro
Scott, Henry – Encinitas Fire Dept
Soto, Alicia – Symons Ambulance
Twohy, Frank – Elfin Forest/Harmony Grove
Ward, Darrin – Encinitas Fire Dept

Recorder

Wolchko, Janet I.

I. CALL TO ORDER/INTRODUCTIONS/ANNOUNCEMENTS

Barbara Cerny, Chair called the meeting to order at 4:00 p.m. Introductions were made.

II. APPROVAL OF MINUTES

A motion was made by Peter Zovanyi, seconded by Terry Sinnott to approve the minutes from the May 1, 2012 CSA-17 meeting. Motion carried.

A motion was made by Peter Zovanyi, seconded by Mark Muir to approve the minutes from the August 7, 2012 CSA-17 meeting. Motion carried.

III. PUBLIC COMMENTS/PETITIONS

There were none present or submitted.

IV. BOARD LETTER

A draft Board Letter was discussed at the previous CSA-17 Advisory Committee meeting to initiate the competitive procurement process and was distributed with the documents for today's meeting. The Board Letter authorizes the County Department of Purchasing and Contracting to initiate the competitive process for Advanced Life Support services in CSA-17. It was decided to address the Board Letter after the Operations Report and Discussion of Services agenda items.

V. OPERATIONS REPORT

Darrin Ward, Encinitas Fire Department and Mary Murphy, CSA-17 EMS Coordinator presented an Operational Overview in a PowerPoint presentation that included the following summary information:

A. CSA-17 background:

- 1969 The County Board of Supervisors formed the CSA-17 District.
- 1992 The area was redesigned as an EMS District to allow Advanced Life Support (ALS) services
- 1993 The District was expanded with the remainder of Rancho Santa Fe Fire District, portions of Del Dios and 4- S Ranch into CSA-17.
- 1999 Most of the fire departments within the CSA-17 with the exception of Elfin Forest all provide ALS First Responder service. Elfin Forest provides Basic Life Support (BLS) First Responder service as well as a BLS ambulance.

The current CSA-17 area model is a combination of First Responder paramedics on fire engines and transport ambulance medics with an EMT. Paramedics require 2,200 hours of training, administer 30 different drugs and provide Advanced Cardiac Care; EMTs require 120 hours of BLS and splinting training.

CSA-17 has 13 ALS engine/truck companies from 4 different fire agencies, each apparatus having one or more paramedics. Elfin Forest has a BLS first responder service. Only part of Elfin Forest is in the CSA-17 service area. Rural Metro currently operates five 24-hour ambulances and one 12-hour ambulance in CSA-17.

After the 2007 contract was awarded, SDMS (Rural Metro) added another 24-hour ambulance to Rancho Santa Fe for optimal coverage and to meet response time requirements in CSA-17. The Encinitas ambulance was re-positioned for improved response.

Demographics were presented for each area along with response time criteria.

B. ESCi Study, 2005

The ESCi Study was conducted with data on community growth, policies, procedures and financial data, emergency incident data, service delivery practices and current service delivery objectives and targets.

At that time, Rural Metro was the ambulance provider; there were three 24-hour ambulances with 2 paramedics on each ambulance. The ambulances were based in Solana Beach, Encinitas Station 5 and Rancho Santa Fe Station 1. Following the report a decision was made to convert the three 2-paramedic ALS ambulances to three 24-hour units and two 12-hour units with 1 paramedic and 1 EMT on each ambulance.

The Deccan Study was then commissioned to establish the optimal positioning for those units.

C. The following issues were identified:

Planning for system change, growth and operations:

2005 - There was a concern due to system demand and increased population in the area. At that time, the call volume was approximately 5,676 and there were 3 ambulances in CSA-17.

2012 – The call volume is approximately 6,932, with 5 24-hour ambulances and 1 12-hour ambulance.

Response times:

The 2005 contract stated that response time was to be within 10 minutes for the entire CSA-17 area as a whole.

In 2012, following the review of the ESCi and Deccan Study findings, the 10 minute response time was applied to each jurisdiction with a 90% or more goal rate with the exception of Elfin Forest. As a result of the new RFP requirements a 6th unit was added.

Financial Inequity:

In 2005, CSA was funded through the “benefit fee” and a share of the property tax. Long term sustainability of services to the CSA-17 area was addressed and the long term costs of operations. Currently, there is a resident fee of \$400 plus mileage for residents in the area which is predicted to balance the financial inequity.

End of Service Contract for Ambulance Services:

There was concern that there was no contingency plan in the event there was an issue with provider coverage. If there was an issue with provider coverage, the County would most likely look to the fire agencies to support the EMS system. The fire agencies were encouraged to react to any sudden changes by creating a joint power agreement to make system improvements.

System Performance:

It was recommended to have more in-depth monthly compliance reports. The report would include alarm processing time, turnout time, travel time and response time.

Deployment of Services:

The study raised concerns because ambulances were co-located with first responders and had an overlap of paramedic resources. There was also a concern with first responder agencies guaranteeing all ALS response times.

ALS First Response:

Deccan International was commissioned in 2005 to review ambulance placement, to look at planning for projected growth of CSA-17, and was tasked to resite the three units that were in service at the time. The goal was to site 2 new peak 12-hour medics focused for 2008, and resite the existing 3 units.

D. Deccan Study Criteria

The Deccan Study examined how to judge response times and to target 90% or more of calls within 10 minutes. The two measures that were used were Incident Score which is the percentage of calls within 10 minutes, and Coverage Score which is the percent of area within 10 minutes.

Over the course of the Deccan study, various scenarios and repositioning of the units were reviewed for the district. Call volume was reviewed and peak time of day was identified as between 0800 and 2000 hours. Deccan looked at 2004 and 2008 projections with population growth and demand, and considered the impact of having and not having San Diego provide mutual aid to the CSA-17 area.

Individual community challenges

Del Mar:

- 1) Secondary calls, dispatch of San Diego Medic Unit 24 from Del Mar Heights assist response.
- 2) If the 12 hour unit is moved from Encinitas Station 2, it would decrease coverage for backup in Solana Beach and Del Mar.
- 3) High impact events which has improved with the recent contract.

Encinitas:

- 1) Has the highest call volume but not the most ambulances.
- 2) Would like to increase services in the Olivenhain area by decreasing ambulance response times.

Rancho Santa Fe Fire:

- 1) Has adequate coverage with the current deployment model.
- 2) Needs the current units for coverage and to meet response time criteria.
- 3) Would like the County to include property tax collection in 4-S Ranch.

Solana Beach:

- 1) Has adequate services
- 2) Has good response time from both fire and ambulance companies

3) Backup ambulance call times will decrease if a 12-hour ambulance is moved to Encinitas Station 2.

Elfin Forest:

- 1) Exempt from the 10 minute 90% response time criteria
- 2) They would like the Elfin Forest/Harmony Grove area to be annexed to CSA-17
- 3) The unit placed at RSF Station 4 significantly decreases response time to Elfin Forrest.

E. CSA-17 Operations RFP recommendations

Equipment:

1. EKG monitors the same for all providers and restocked through the ambulance provider.
2. LUCAS CPR devices provided in ambulances for better CPR and increase personnel safety during transport.
3. VHF portable and mobile radios for each ambulance along with 800mhz in order to comply with North Comm Communications policy.
4. Ambulance service to resupply oxygen for all first responder units.
5. No new equipment to be place in ambulances until it has been reviewed by CSA-17 Operations Committee and training has been conducted.

Personnel:

1. Provide 24 hour, 7 day a week supervision of crews.
2. Customer service personnel related issues handled by the supervisor. If it is documented more than once it will be reviewed by the CSA-17 Operations Committee. That committee should have the right to remove the ambulance employee from CSA-17.
3. Employee standards, employees to be neat and professional at all times. Ambulance employees need to abide by the fire agencies blended grooming policy. Tattoos and hair styles are important in the public as they do not always understand that there are separate agencies.
4. The Public Education component needs to be evaluated and more specific i.e. Car seat inspections once a month per jurisdiction, quarterly CPR classes in each community.

Operations:

1. Fire Department Battalion Chiefs should able to move ambulances to cover shortages due to out of place engines i.e. during major incidents.
2. A monthly report should be given on the time the ambulances are out of service and the reason why, i.e. for training or classes.

VI. DISCUSSION OF SERVICES

The following issues regarding services in the CSA-17 areas were discussed:

- 24-hour supervision which is not necessarily located in the CSA-17 area, but within San Diego. The preference would be to have 24-hour supervision available in the CSA-17 area.
- Exemption reports, how they are approved and met.
- Property tax distribution and 4-S ranch contribution. 4-S Ranch contributions to CSA-17 were estimated at approximately \$84,000 to \$100,000.
- Would Del Mar be made an available location for providers to house an ambulance? Response was that an impact study has not been done.

- Provider's responsibility for meeting standards. There is a 2-year contract with optional extensions. A performance clause is in the current contract, however there are no financial penalties associated with not meeting standards.
- How response times are recorded, electronically, and radios are used as back-up. The computer will tell you the route. There is also an automatic location unit.
- RFP bidding process, criteria and competitive process. The State EMS Authority has requirements that the State also reviews and approves. Initial recommendations for Source Selection Committee members are made by the department and approved by the HHSA Director.
- Operational requirements and CSA-17 Advisory Board input into the RFP contract. Recommendations are being recorded and during the open forum recommendations will be taken into consideration with the writing of the RFP.
- Recommendation for Chiefs to create a CSA-17 Operations Comprehensive Manual to orient providers to the CSA
- Operations service if there was a financial cost limit.
- Conflict of interest regarding writing of the RFP.

Barbara Cerny, CSA-17 Chairperson thanked the operation chiefs for their comprehensive presentation.

Draft Board Letter review

A motion was made by Peter Zovanyi to initiate the formality of the RFP process.

Discussion: There was an inquiry as to the Advisory Board statement that was noted in the draft Board Letter. Ms. Metz gave an example of a statement that could be given, "The CSA-17 Advisory Board Committee meeting was held on August 28, 2012 where the Advisory Board discussed the current service delivery model for ALS life support services and provided input for the upcoming RFP.

Contract terms and extensions on the Board letter were reviewed.

There was a second motion by Peter Zovanyi, seconded by Terry Sinnott to have the operations report, contract time and extensions terms forwarded to County staff developing the RFP.

Discussion ensued on performance measurements by the operation chiefs for review, the opportunity to hold the contractor accountable as well as the possibility of financial penalties and if financial penalties would be appropriate. The RFP should be clear and specific on what is expected for performance in addition to the 90% in 10 minutes response time.

The RFP will be kept on the CSA-17 Advisory Board agenda.

A final motion was made by Peter Zovanyi, second by Mark Muir to add a CSA-17 Advisory Committee comment to the Board Letter using Marcy Metz draft example. Motion carried.

Barbara Cerny requested that the operations report is added to the CSA-17 agenda as a standing item.

VII. ADJOURNMENT

Meeting adjourned at 6:08 pm.

The next quarterly CSA-17 Advisory Board meeting is scheduled for Tuesday, November 6, 2012 at 4:00 p.m.

Submitted by

Janet I. Wolchko, Administrative Secretary
County of San Diego Emergency Medical Services



County of San Diego

HEALTH AND HUMAN SERVICES AGENCY

PUBLIC HEALTH SERVICES
HEALTH SERVICES COMPLEX

3851 ROSECRANS, SAN DIEGO, CALIFORNIA 92110
(619) 531-5800 FAX (619) 542-4186

NICK MACCHIONE, FACHE
DIRECTOR

WILMA J. WOOTEN, M.D., M.P.H.
PUBLIC HEALTH OFFICER

Epidemiology & Immunization Services
Emergency & Disaster Medical Services
HIV, STD and Hepatitis
Maternal, Child and Family Health Services
Public Health Laboratory
PH Nursing
Border Health
TB Control & Refugee Health
Vital Records

CSA-17 Advisory Committee
Barbara Cerny, Chair/Lee Haydu, Vice-Chair
c/o Emergency Medical Services
6255 Mission Gorge Road
San Diego, CA 92120
(619) 285-6429 Fax: (619) 285-6531

CSA-17 ADVISORY COMMITTEE MEETING

Minutes

Tuesday, November 6, 2012

Members Present

Cerny, Barbara – Torrey Pines Comm. Planning Group
Haydu, Lee – City of Del Mar
Hickerson, Tom – Rancho Santa Fe Fire
Nichols, Mike – City of Solana Beach
Tanner, John – Rancho Santa Fe Fire (Alt)
Zovanyi, Peter – Member-at-Large

County Staff Present

Cavanaugh, Adria
Eldridge, Brett
Haynes, M.D., Bruce
Metz, Marcy
Pate, R.N., Rebecca
Yaghmaee, Saman

Agency Representatives Present

Alvarez, John – Schaefer Ambulance
Davidson, Bret – Rancho Santa Fe Fire Dept
Gilligan, Matt – Rural Metro
Henry, Scott – Encinitas Fire
Johnson, Wayne – Rural Metro
Murphy, Mary – CSA-17 Fire Departments
Olejnik, Lorelee – Rural Metro
Russo, Joe – Rural Metro
Twohy, Frank – Elfin Forest/Harmony Grove
Ward, Darrin – Encinitas Fire Dept

Recorder

Wolchko, Janet I.

I. CALL TO ORDER/INTRODUCTIONS/ANNOUNCEMENTS

Barbara Cerny, Chair called the meeting to order at 4:05 p.m.

II. APPROVAL OF MINUTES

A motion was made by Mike Nichols, seconded by Peter Zovanyi to approve the minutes from the August 28, 2012 Special Advisory Board meeting. Motion carried.

III. PUBLIC COMMENTS/PETITIONS

There were none present or submitted.

IV. MANAGEMENT TEAM REPORT

A. Budget and Finance Report (Saman Yaghmaee)

1. FY 2011/12

Revenue

Property tax (\$10,088 higher than FY 2010/11)	\$ 997,386
Benefit fee (\$18,225 higher than FY 2010/11)	\$1,367,330
Non-resident	\$ 174,266
Resident	\$ 695,590
Other revenue and adjustments	<u>\$ 16,360</u>
Total revenue	\$3,250,932

Billing residents and non-residents for ambulance transports started December 2011 for private/commercial insurance. The process for billing public insurance began in January/February 2012.

Expenditures

Total expenditures were \$3,264,281. Expenditures increased by about \$621,666 due to changes in contracts and the new source of revenue for billing residents.

2. FY 2012/13 year-to-date update (July 1-Oct 31, 2012)

Revenue

Year-to-date revenue is about the same compared to this period last year with the addition of the new sources of revenue from billing residents and non-residents for ambulance transports.

Resident Transports	\$ 421,742
Non-resident transports	\$ 105,571

Revenue from transports of residents and nonresidents is projected at approximately \$2 million in FY 2012/13 and includes revenues for services provided in FY 2011/12. Future revenue for transports is preliminarily projected to be approximately \$1.6 million dollars annually. If everything remains constant, a surplus of about \$250,000 is projected in the fiscal year budget and can potentially bring the cash reserve balance in FY 2015/16 to the same level it was in fiscal year 2006/07, around two-million dollars.

B. Administrative Report (Marcy Metz)

1. The Statewide Medical Health Exercise is conducted annually by the State Department of Public Health and the California Emergency Medical Services (EMS) Authority. The exercise will be held on November 15, 2012 from 7 pm to 11 pm to include the evening and night shift.

The scenario of the drill will be an earthquake with a focus on communication and evacuation of neonatal intensive care units.

The EMS Departmental Operations Center will be activated. Plans are being finalized to have the Joint Information center open for the hospitals to practice their communications with the Emergency Operations Center.

2. The Health Capacity Task Force meets annually to review the capacity plan in preparation for the flu season.

Prehospital agencies and Emergency Departments reported a 6% increase in volume.

Surveillance reports were reviewed by the Health Capacity Task Force Subcommittee. It was decided to add additional reports to the normal surveillance generated by EMS and County epidemiology.

Draft changes to the Health Capacity Plan were released yesterday to the community partners.

3. CSA Advisory Committee elections for Chair and Vice-Chair will take place at the CSA-17 February meeting.
4. CSA-17 will be convening their Budget Subcommittee meeting prior to the Advisory Committee meeting to review the budget that is submitted as part of the County budget for the upcoming fiscal year.

C. Medical Directors Report (Dr. Haynes)

1. Last week there were a few reported cases of the flu. Everyone 6 months or older should receive a flu shot unless they have a serious allergy to the vaccination. It is particularly important for those working with patients in the field to receive the vaccine for their own health and to minimize transmission to patients.
2. Every two years the treatment guidelines for EMT's and paramedics to use in the field are reviewed. A committee is in the process of review.

D. Paramedic Provider Report (Matt Gilligan)

An exemption report folder from May 2012 to August 2012 and new response and destination report year-to-date was provided to the committee members.

1. The number of transports is up 4 to 5 percent. There has been a 4% increase in the last 20 years, which is the largest increase in any previous quarter. Law Enforcement has also seen an increase in 911 call volume.
2. Community Education
 - CE hours for the Pediatric Advance Life Support (PALS) class were provided by Mary Murphy.

3. Community Outreach (Loralee Olejnik)

- October was fire prevention month. The agencies held their own fire department open house for their community.
- Ann Marie Jensen, a CSA-17 area paramedic that works out of Rancho Santa Fe, was awarded the "Paramedic of the Year" designation for San Diego. Ms. Jensen is currently working on the Resource Access Program (RAP) where high users of EMS are given more appropriate resources to use.

4. Operations Overview (Darrin Ward)

- The new exemption report electronic system is working well and should keep reports current.
- The half time ambulance at Encinitas Station 1 is being considered to move to Encinitas Station 2 for an initial trial period.
- Billing system in CSA-17: There is an agreement with the City of San Diego and the County where San Diego bills CSA-17 when a transport is made in their area, and CSA-17 bills the resident. This agreement is in place for the San Diego City southern area, but currently there is not an agreement in place for the Leucadia North region which is the Carlsbad transport unit area.

City of Carlsbad base fee for non-residents is \$1,024 plus mileage. Average patient charge is \$1,700, mileage inclusive. Most agencies have a charge of \$150 for an assessment fee.

Mutual Aid Policy was discussed. San Diego average patient transport rate is \$1700. Base rate for San Diego is approximately \$1,200 to \$1,300. A mutual aid report will be generated for transports in the CSA-17 and City of San Diego areas. There was a suggestion to have an historical report generated to see if there should be a recommendation for a policy.

V. CSA-17 RFP (Marcy Metz)

The Board letter went forward and was approved on September 25, 2012 for the CSA-17 procurement services to be initiated.

It was asked if the Del Mar Fairground contributes to 911 transports. Transports from the Del Mar Fairground are billed a non-resident fee. The number of transports made during the San Diego Fair and racing season has decreased, and there has been no impact to CSA-17 in three years.

VI. NEW BUSINESS

There was no new business.

VII. SET NEXT MEETING/ADJOURNMENT

The next CSA-17 Advisory Board meeting is scheduled for Tuesday, February 5, 2013 at 4:00 p.m.

The meeting was adjourned at 4:44 p.m.

Submitted by

Janet I. Wolchko, Administrative Secretary
County of San Diego Emergency Medical Services